



Bord Altranais agus
Cnámhseachais na hÉireann
Nursing and Midwifery Board
of Ireland

Nursing and Midwifery Board of Ireland

Consultation Document

Appendix D2

(Midwifery HEI Site Inspection Audit Tool)

Title: NMBI Site Inspection Audit Tool for Education Bodies for Programmes Leading to Registration and Specialist Programmes not Leading to Registration

Note* HEI Site Inspection Summary Report will be generated based on this Site Inspection Audit Tool.

[Type the company name]

**NMBI Site Inspection Audit Tool for Education Bodies for
Programmes Leading to Registration and Specialist
Programmes not Leading to Registration**

Name of Education Body (Higher Education Institution):

CONTACT INFORMATION

NAME OF HIGHER EDUCATION INSTITUTION (HEI)	
ADDRESS	
HEAD OF NURSING & MIDWIFERY SCHOOL	
PHONE NUMBER	
EMAIL	
PROGRAMMES PROVIDED	
RM	
RMP	
RAMP	
Specialist Programmes not Leading to Registration	

NAMES OF ASSOCIATED HEALTH CARE PROVIDERS (AHCPs)

To demonstrate that the programme is fit for purpose and meets the criteria for professional approval, the AHCPs are required to identify and describe the evidence required under each of the indicators as outlined in the NMBI (2016) *section 3.2 Standards for the Approval of the Higher Education Institutions and Associated Health Care Provider Services and Educational Programmes Leading to Registration*.

Reference:

NMBI (2016) *Midwife Registration Programmes Standards and Requirements*. 4th ed. Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2017) *Midwifery Registration Education Post-RGN Programmes: Standards and Requirements*. 4th ed. NMBI, Dublin.

Nursing and Midwifery Board of Ireland (2018) *Advanced Practice Midwifery Standards and Requirements*. 1sted. NMBI, Dublin.

The regulatory mechanism and authority:

85.— (1) The Board shall—

- (a) set and publish in the prescribed manner the standards of nursing and midwifery education and training for first-time registration and post-registration specialist nursing and midwifery qualifications, and
- (b) monitor adherence to the standards referred to in paragraph (a).
- (c) set and publish in the prescribed manner standards required for registration in any division, annotation and specialist nursing and midwifery qualifications pursuant to programmes approved under paragraph (a),
- (d) monitor adherence to the criteria referred to in paragraph (a), the guidelines referred to in paragraph (b) and the standards referred to in paragraph (c),
- (e) inspect bodies approved under paragraph (a) in order to ensure ongoing compliance with the criteria referred to in that paragraph, the guidelines referred to in paragraph (b) and the standards referred to in paragraph (c),
- (f) inspect, at least every 5 years, places in the State where training is provided to persons undertaking training for a nursing or midwifery qualification, for the purposes of monitoring adherence to nursing and midwifery education and training standards.

The focus of the site inspection is:

Through a partnership approach to

- Assess that all statutory and regulatory requirements of the NMBI and the European Directives are met.
- Assess the effectiveness and efficiency of the curriculum structures, processes, and outcomes.
- Assess the quality and appropriateness of the educational experiences.

Key FC – Full Compliant, PC – Partial Compliant, NC – Non-compliant

3. The HEI:

	Indicators	FC	PC	NC
1	In what way are the statutory and regulatory requirements of the NMBI and European Directives met?			
2	How has the HEI and its AHCPs responded to change because of health, social and economic issues?			
3	Is there a major institutional review of the effectiveness of the programme of study? How do you ensure that there is independent oversight and scrutiny?			
4	How the HEI and its schools or departments educational learning resources and facilities (including technological support) are adequately supporting delivery of the entirety of the programme.			
5	Is there a mechanism for recording student midwife attendance to ensure the minimum EU and NMBI requirements are met?			
6	Who are the key stakeholder representatives on the curriculum development team in midwifery education and practice?			
7	Is the curriculum development team led by academic staff who are midwifery lecturers? Can you describe the organisation structure that supports the midwifery programme?			
8	Have midwifery lecturers who support students undertaking programmes leading to registration registered in the midwives division of the Register?			

9	What other responsibilities have lecturers regarding programmes leading to registration?				
10	What other teachers and or lecturers are involved in the delivery of the programmes?				
11	What mechanisms are in place to support students both in the HEI and its AHCPs?				
12	How do students evaluate the theoretical component of the programme and how is this feedback utilised?				
13	What mechanisms are provided by the HEI to support staff development to ensure that staff can deliver programmes leading to registration?				
14	What mechanisms are in place for staff development that prepares them to deliver the programme, including the provision for maintaining midwifery expertise and academic and clinical credibility.				
15	What formal grievance and complaints policy for students is in place?				
16	What processes for monitoring of student achievement, progression and completion are in place?				
17	A formal appeals procedure is in place with clear guidance on the process for students.				
18	What processes are in place from the HEI to support students in the practice learning setting and the clinical environment?				
19	Have any changes been introduced to the course as a result of service developments?				

20	What plans are in place to support the delivery of the programme for the five year approval?				
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4. Curriculum Design and Development

1	On what level of the National Framework of Qualifications (NQAI 2015) are the programmes provided?			
2	How have you ensured that the safety of the mother and her baby and protection of the public are integral and explicit within the curriculum?			
3	Who is leading the team that designed the programme? What is their qualification? How do you ensure that the educational theory and midwifery knowledge is evidenced based?			
4	How have you planned the curriculum so that theory is integrated with practice so that students achieve the NMBI learning outcomes?			
5	What teaching, learning and assessment methods are used?			
6	Do students have opportunities to experience a clinical placement within or outside the EU?			

5. Clinical Practice Experience and the Clinical Learning Environment

1	Are clinical placements approved by the NMBI?			
2	Are clinical placements subject to audit regarding suitability as quality clinical learning environments? How often do you undertake monitoring of the clinical site suitability as an optimum learning environment?			

3	Do the clinical placements allow students to have direct contact with the mother and baby? Does this occur early in the programme?				
4	Demonstrate how students and those involved in meeting their learning needs are fully acquainted with the expected learning outcomes relating to that clinical placement.				
5	For the last six months what has the CPC ratio been and what has been the allocations liaison officer ratio?				
6	Evidence that each student has been offered a primary preceptor who is a registered midwife or a nurse in the NICU.				
7	Evidence that preceptors who are assessing students have completed approved NMBI teaching and assessment course.				
8	Information regarding support mechanisms for preceptors and how they maintain and develop their competence supporting students?				
9	How do you evaluate students experience with the preceptorship provided in each clinical area?				
10	Does the clinical placement include experience of the 24 hour cycle (check the rota)?				
11	Supernumerary status of students is clearly articulated.				
12	What supervision and supports are provided to the final placement of the 36 week internship students? How do you facilitate consolidation of the completed theoretical learning and support the achievement of clinical competence on graduation and registration?				

13	Confirm the specific periods of reflection provided to students.				
14	<p>Clinical placements have in place quality assurance indicators relating to</p> <ul style="list-style-type: none"> • Midwifery staffing • Number of preceptors • Multidisciplinary evidence-based practice guidelines and policies to support care • The mechanism for development of evidenced based guidance and policies with multidisciplinary involvement • Proof of application of evidenced based care • Evidence of individualised women and baby centred care • Availability of policies and protocols in medication management and good practice in recording midwifery care and interventions • Audits available of midwifery documentation • Evidence of continued professional development (CPD) for all staff involved in the multidisciplinary team • Evidence of the clinical risk management programme in place • Mechanisms in place to support students' preceptors and midwives • Evidence of an educational and clinical audit • Mechanisms in place to review the quality of preceptorship • Mechanisms in place to include women and their families in the evaluation of maternity care 				

6. Assessment Process:

1	How are formative and summative assessments structured to ensure progression from year to year and ensure that students are competent at the end of the programme?			
2	Does the assessment strategy allow compensation between theoretical and clinical practice?			
3	How is the programme assessment strategy planned and is it fit for purpose?			
4	Do students receive from an early stage, the provision of an assessment map detailing the range of examinations, assignments, practice-based and other assessments of proficiency that will be encountered and the criteria used to measure their academic and practice performance?			
5	How do you ensure that assessment techniques are established to allow reliable and valid measurements of learning outcomes?			
6	Are assessments based on a variety of strategies that are aligned with the subject area, practice placements learning environment and stage of the programme and are they consistent with the module learning outcomes?			
7	How does the assessment strategy ensure that graduates meet the intended programme learning outcomes and competencies for the proficient practice as a registered midwife?			
8	How are assessments subject to administrative checks to verify accuracy of the procedures used?			

7. Student statistics over the 4 cohorts (if applicable)

	RM	RMP	RAMP
Total number allocated	Year 1 Year 2 Year 3 Year 4	Year 1 Year 2	Year 1 Year 2
Total number offered	Year 1 Year 2 Year 3 Year 4	Year 1 Year 2	Year 1 Year 2
Total number commenced	Year 1 Year 2 Year 3 Year 4	Year 1 Year 2	Year 1 Year 2
Total number completed	Year 1 Year 2 Year 3 Year 4	Year 1 Year 2	Year 1 Year 2
Total attrition rate	Year 1 Year 2 Year 3 Year 4	Year 1 Year 2	Year 1 Year 2
Total number of clinical sites involved			
Total number of clinical sites that have completed self-assessment audit of compliance			

8. Student Experiences

HEI

Clinical Areas

9. NMBI Site Inspection Team Feedback to HEI

10. Findings of the NMBI Site Inspection Team to the Board

11. Conditions Applied by the Board

12. Issued Recommendations for Improvement

13. Good Practice Noted

Declaration

We declare that the HEI has met all the standards as outlined above.

Name of Inspector:

Signature:

Date:

Name of Inspector:

Signature:

Date: